

DEC 14 2006

## CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

Applicant(s): Shcherbakova et al.

Docket No.

50821/5

Application No.

10/531,161

Filing Date

April 12, 2005

Examiner

Tamthom Ngo Truong

Group Art Unit

1624

Invention: QUINAZOLINONE COMPOUNDS AS CALCILYTICS

I hereby certify that this Amendment (including the items listed below)

(Identify type of correspondence)

is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 571-273-8300)

on

Dec 14, 2006  
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Kevin B. Laurence


(Typed or Printed Name of Person Signing Certificate)

  
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Transmitted: Certificate of Transmission by Facsimile (37 CFR 1.8) (1pg.)  
Amendment Transmittal (1 pg.)  
Amendment (11 pgs.)Total Pages Transmitted 13 pages

DEC 14 2006

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. 50821/5									
Applicant(s): Shcherbakova et al.														
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.									
10/531,161	April 12, 2005	Tamthom Ngo Truong	32642	1624	4723									
Invention: QUINAZOLINONE COMPOUNDS AS CALCILYRICS														
<u>COMMISSIONER FOR PATENTS:</u>														
Transmitted herewith is an amendment in the above-identified application.														
The fee has been calculated and is transmitted as shown below.														
<b>CLAIMS AS AMENDED</b>														
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE									
TOTAL CLAIMS	18 -	20 =	0	x \$50.00	\$0.00									
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00									
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00									
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>									
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-2375 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038.														
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>														
 Signature			Dated: DEC 14, 2006											
Kevin B. Laurence Registration No. 38,219 Stoel Rives LLP 201 South Main Street, Suite 1100 Salt Lake City, UT 84111 Telephone: 801-578-6932 Facsimile: 801-578-6999			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</td> </tr> <tr> <td colspan="2" style="text-align: center;">(Date)</td> </tr> <tr> <td colspan="2" style="text-align: center;">Signature of Person Mailing Correspondence</td> </tr> <tr> <td colspan="2" style="text-align: center;">Typed or Printed Name of Person Mailing Correspondence</td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on		(Date)		Signature of Person Mailing Correspondence		Typed or Printed Name of Person Mailing Correspondence	
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